



**DORSET & WILTSHIRE  
FIRE AND RESCUE  
AUTHORITY**

# Statement of Assurance 2021-2022



PASSIONATE ABOUT  
**CHANGING & SAVING LIVES**

# Contents

Introduction	3
Governance	3
▶ How we assure our corporate governance arrangements	3
Financial	7
▶ How we assure financial arrangements	7
Operational	10
Prevention	10
▶ How we assure our Prevention arrangements	10
Protection	13
▶ How we assure our Protection arrangements	13
Response and Resilience	14
▶ How we assure our Response and Resilience arrangements	15
Health, Safety & Welfare	18
Current and future challenges	19
Conclusion	21

## Introduction

1. The Fire and Rescue National Framework for England, published in May 2018, sets out the requirement for all fire and rescue authorities in England to publish an annual Statement of Assurance which covers financial, governance and operational matters.
2. This Statement of Assurance sets out our approach as to how we deliver and assure our governance, financial and operational (incorporating prevention, protection, response and resilience) arrangements.
3. Within this statement we have also set out our health and safety arrangements and the current and future challenges that we face, and how these will be managed.

## Governance

4. Our governance arrangements are set out within our published [Corporate Governance Policy](#). An effective corporate governance framework provides us with a system of internal control to monitor the delivery and achievement of our strategic priorities and to help provide transparency and scrutiny regarding the delivery of appropriate and cost-effective services.
5. Dorset & Wiltshire Fire and Rescue Authority (the Authority) act as our overall governing body and comprises of 18 elected Members from our four constituent areas. These are:
  - Bournemouth, Christchurch and Poole Council
  - Dorset Council
  - Swindon Borough Council
  - Wiltshire Council
6. The Authority produces a strategic plan known as the [Community Safety Plan \(CSP\)](#) which sets out our four year high-level visions and priorities. This plan is supported by a wide variety of documents to translate this intent into on the ground action.
7. Members of the Authority have a legal duty to monitor our operational performance. This is achieved through various workstreams and appointed committees as well as the full Fire and Rescue Authority.

### ► How we assure our corporate governance arrangements

#### **Local Government Association peer review**

8. The governance model of our Authority was independently assured in July 2019 by the Local Government Association (LGA) who undertook a bespoke governance peer review covering the following key areas:

- overall organisational governance
  - our assurance framework and supporting procedures that underpin the annual Statement of Assurance
  - the quality of Member and Officer relations
  - the scope of opportunity for Member development arrangements
  - the development of the annual Statement of Assurance, and
  - recommendations for strengthening the current governance arrangements.
9. The [LGA report](#) provided us with positive assurance, citing that, '*the overall impressions are that the Authority is a good, well organised Fire and Rescue Authority*'. All of the opportunities for further improvements arising from this peer review have been implemented.

### **Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS)**

10. Within its [first inspection report](#) of our Service, HMICFRS commended our high standard of performance in all areas and in meeting the needs of our communities. The Inspectorate awarded our Service the grading of 'Good' against all three pillars of the inspection: Effectiveness, Efficiency, and People.
11. During the Coronavirus pandemic HMICFRS undertook a Covid-19 themed inspection of all fire and rescue services in England.
12. Whilst no graded judgements were awarded following these inspections, each service received a letter to confirm the inspection findings. Overall, HMICFRS found that we provided a very positive and robust response to the pandemic and noted no significant areas of concern.
13. [Our letter](#) confirmed that we had rapidly established comprehensive arrangements to cope with the challenges and uncertainties associated with the national pandemic. Furthermore, HMICFRS were positive about the fact that core functions were maintained and that we were able to quickly adapt our ways of working to keep the community safe whilst maintaining high standards of health, safety and welfare of our staff.
14. HMICFRS undertook its second full inspection of our Service during February and March 2022. The report that will set out their findings is anticipated to be published in December 2022.

### **Code of corporate governance (CIPFA/SOLACE)**

15. As part of our assurance process, we have assessed against, and aligned our approach to, the Corporate Governance in Local Government framework (2016) published by the Chartered Institute of Public Finance and Accountancy (CIPFA) and Society of Local Authority Chief Executives (SOLACE). This supports our additional requirement to publish an Annual Governance Statement which is included within our statutory [Financial Statement of Accounts](#). This Statement is audited annually by our external auditors.

## Internal Audit

16. To support the external audit process and to provide additional independent assurance controls, we have in place a robust system of internal auditing. The South-West Audit Partnership are appointed as our Internal Auditors and are delivering a four year internal audit programme of work which covers key areas of our Service.
17. A proposed annual internal audit plan is developed with our Strategic Leadership Team. This plan is then reviewed by our internal and external auditors to ensure appropriate coverage of 'the eight themes of a healthy organisation' which are set out below:
  - Corporate Governance
  - Financial Management
  - Risk Management
  - Performance Management
  - Commissioning & Procurement
  - Information Management
  - Programme & Project Management
  - People & Asset Management
18. Following approval from the auditors, the audit plan is submitted to the Finance & Audit Committee, as a delegated duty of the Authority, for final approval.
19. The following areas were covered in the 2021-22 plan, alongside the assurance ratings that were awarded for each:
  - Operational Obsolescence (*adequate assurance*)
  - Pensions Administration and Employer Contributions Review (*adequate assurance*)
  - General Ledger (cash and bank) (*substantial assurance*)
  - Corporate Performance Management Framework (*substantial assurance*)
  - Skills Management and Competency Recording (*substantial assurance*)
  - Leadership Development (*substantial assurance*)
  - Strategic Planning and Stakeholder Engagement (*substantial assurance*)
  - Critical Supplies & Supply Chain – Emergency Response (*adequate assurance*)
20. Performance against the internal audit plan is reported to senior managers and Members on a quarterly basis at the Finance & Audit Committee meetings.
21. Our quarterly internal audit reports, which may include any agreed improvement actions, are published and available on our website. Any improvement activities are reviewed at the quarterly [Finance & Audit Committee meetings](#) until they are signed off as complete. Good progress has been made in 2021-22 in discharging these actions.

22. Additionally, an annual opinion of our controls and arrangements is provided by our Internal Auditors.
23. For the period 2021-22 we were awarded an overall 'substantial' annual assurance opinion. This opinion confirms that, in relation to the areas of work covered,  
*'A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited'*.

### **Strategic Planning and Performance Management**

24. To support the development of our CSP we undertake a [Strategic Assessment of Risk \(SAR\)](#) to ensure that we are fully aware of our current and future challenges. The SAR is developed through the undertaking of a Political, Economic, Social, Technological, Legal, Environmental and Organisational (PESTLEO) analysis that draws on a broad range of information, data, and intelligence to support our decision making.
25. We consult and engage with key partners and stakeholders in the delivery of the SAR to ensure that it is comprehensive and appropriately aligned to meet the needs of our communities.
26. Our CSP arrangements are aligned to the national standards published by the Fire Standards Board.
27. The strategic issues, expectations and requirements set out within the CSP are supported by and delivered through our Service strategies. These strategies are translated into day-to-day activities through our Service Delivery Plan and our arrangements are aligned to HMICFRS's inspection methodology.
28. Our overall performance is monitored internally on a monthly basis through our performance management system. This provides our senior management with an oversight of our service delivery.
29. Performance data is scrutinised by Members at Authority level and additionally by the four Local Performance and Scrutiny (LPS) Committees which are in place for the constituent authorities. This approach provides a mechanism for ensuring local accountability, focus and ongoing support for matters relating to the specific geographical areas across the Service. The Authority and LPS meetings are public meetings, held locally on a quarterly basis. Performance information and associated [reports are accessible through our website](#).
30. In addition to these quarterly reports, we deliver a performance presentation to the full Authority every six months, and we publish an annual report each September. This report is available on our website and sets out our progress in the delivery of the CSP and the key achievements that we have made.
31. Our strategic planning framework and corporate performance management framework were both independently scrutinised through our Internal Audit programme in 2021-22. The arrangements for both were awarded 'Substantial', which is the highest level of assurance.

## **Information Governance & Data Transparency**

32. We have incorporated our policy position on information governance within the wider [Corporate Governance policy](#) and comply with the Government's 'Local Government Transparency Code 2015' for publishing public data. Our website provides details of the information required to be published.
33. We maintain a freedom of information publication scheme, where we work to respond to requests under the requirements of the Freedom of Information Act 2000. We have strengthened our data protection arrangements to ensure that data protection impact assessments are conducted for all new processes involving the collection of personal data.
34. An Information Governance Group (IGG), made up of representatives from departments across the Service, meets three times a year to manage information risks and share information about the wider national picture.
35. Our corporate complaints process ensures any complaints are recorded, investigated, and resolved within 14 working days.
36. We align our arrangements to the principles of British Standards Institution 27001 (the recognised management system for managing information security governance risks) to drive improvement and embed good information governance practices.

## **Financial**

37. It is a statutory requirement set out within the Accounts and Audit (England) Regulations 2015 for all fire and rescue authorities in England to publish the financial results of their activities for the year.
38. Our [Statement of Accounts](#) sets out the annual costs of providing our Service. The format is determined by the CIPFA Code of Practice, which aims to give a "true and fair" view of our financial position and transactions.
39. We adhere to a [Financial Management Policy](#) which ensures that we have the appropriate processes in place to demonstrate sound financial management and control of our assets. This policy is supported by a number of procedural documents.

### **► How we assure financial arrangements**

40. The Head of Financial Services and Treasurer is responsible for producing the Statement of Accounts ready for approval and publication. To meet the requirements of the Accounts and Audit Regulations, the Statement of Accounts must be approved and published annually, usually by the end of July. This timescale has been extended to 30 November for the Statement of Accounts covering 2021-22 and 2022-23.
41. The Authority approves a [Medium Term Finance Plan \(MTFP\)](#) each year, along with the revenue and capital budgets. Our MTFP sets out an outline financial strategy to meet the requirements of the strategic priorities as set out in our CSP. This includes plans for achieving efficiency, value for money and our approach to managing our reserves.
42. In line with the Chartered Institute of Public Finance and Accountancy (CIPFA) Treasury Management Code of Practice, we produce an annual Treasury Management Plan. This plan supports the provision of all services and functions through the management of the Authority's cash flow, debt, and investments.

43. Robust budgeting processes are in place, with annual reviews of budgets taking place at departmental level. This approach ensures that budgetary forecasts are effectively used to support organisational decision making.

44. Our Service was awarded the rating of 'Good' within the 'Efficiency' pillar in our first HMICFRS inspection, with the Inspectorate confirming that.

*'We found it to be good at providing an efficient service. And it is good at using resources and providing an affordable service'*

*'The service has a good understanding of the current financial climate in which it operates. In the past, it has shown it has the flexibility to change to meet financial challenges. We saw that the key financial decisions it has made are linked to risk and are in line with its community safety plan'*

### **External Audit Arrangements**

45. On an annual basis, our Statement of Accounts are subject to external audit scrutiny. Since 2018, Deloitte LLP have been our appointed external auditors. Deloitte LLP are responsible for the completion of the following assurance activities:

- auditing of the annual financial statements
- providing an annual opinion on the Authority's accounts, and
- providing a value for money conclusion.

46. Deloitte LLP have completed their audit of the 2020-21 financial statements and provided an unmodified (or unqualified) opinion in respect of our accounts and value for money arrangements. An unqualified audit provides assurance that our financial statements are transparent and compliant with accounting regulations.

47. In its Auditors Annual Report 20/21, Deloitte LLP confirmed that.

*'The Authority has a thorough annual financial planning and forecasting process. The financial plan is considered as part of the overall operational planning process and this process is led by the Head of Financial Services and Treasurer. The Authority has a balanced Medium Term Financial Strategy for 2020/21 to 2024/25'.*

48. The 2021-22 financial statements are scheduled to be audited in July 2022 with External Audit sign off currently anticipated in November 2022.

### **Procurement**

49. Our Procurement Plan (2022-26) is structured to provide a clear picture of where we are now, the context of our procurement landscape and how this will be developed and enhanced.

50. Our Procurement Plan sets out our arrangements for the procurement of all goods, services from third party organisations and supports the Authority's Standing Orders and Financial Regulations. The plan outlines what we want to achieve and provides a picture of our intentions over the next three years.



51. In the development of our Procurement Plan, we have ensured its alignment to the National Procurement Strategy (2018) and have reviewed our arrangements against the maturity levels set out across the three priority areas set out in this strategy.
52. Our procurement process starts with the identification of need and continues through to the end of the contract or useful life of an asset. Procurement arrangements are embedded within the organisation and supported through our Service procedural guidance.
53. The Procurement Manager oversees the day-to-day procurement processes to support compliance with standing orders and regulations. All of our contracts are managed through the Bluelight Procurement Database and this information can be accessed by suppliers and the public via our website.
54. Following the United Kingdom's exit from the European Union, our policies and procedures were reviewed and amended to reflect legislative changes.
55. Our arrangements have been aligned to the new procurement thresholds that came into force from 1 January 2022 following updates to the Government Procurement Agreement (GPA) thresholds.
56. We have processes in place to capture savings and efficiencies arising from procurement activity. Efficiency savings feed into our wider value for money arrangements and the National Fire Chiefs Council (NFCC) savings register. Government analysis indicates that we procure at, or below, the national average against a standard basket of goods.
57. We ensure that our procurement arrangements are aligned and within the requirements of the following legislation and statutory guidance:
  - Fire & Rescue Service National Framework (2018)
  - Policing & Crime Act (2017)
  - Public Contract Regulations (2015)
  - Public Services (Social Value) Act (2012)
  - Modern Slavery Act (2015)
  - Health and Safety Act Work Act 1974 and associated regulations
  - Public Procurement (Amendment etc.) (EU Exit) Regulations 2020 SI 1319 (PP Amendment Regulations 2020)
  - Equality Framework for the Fire Services (Revised 2017)
58. We undertake impact assessments as part of our procurement process to ensure that equality, diversity, and inclusion issues are considered and that we meet our corporate and social responsibilities in respect of the procurement of goods and services.

## **Operational**

59. We are required to comply with a range of legislation and regulations for each element of the organisation. The key general legislative requirements for our operational delivery are set out within:
- Fire and Rescue Services Act 2004
  - Civil Contingencies Act 2004
  - Regulatory Reform (Fire Safety) Order 2005
  - Fire Safety Act 2021
  - Fire and Rescue Services (Emergencies) (England) Order 2007
  - Fire and Rescue Service National Framework for England (2018)
  - Health and Safety at Work etc Act 1974, and associated regulations
  - Policing and Crime Act 2017
  - Crime and Disorder Act 1998
  - Localism Act 2011
  - The Coroners (Investigations) Regulations 2013
60. Our operational service delivery has three key components: Prevention, Protection and Response & Resilience.

## **Prevention**

61. Our prevention teams, supported by station-based staff and volunteers, work alongside partner agencies to identify those most at risk from fire. They will then provide appropriate advice and equipment to help prevent fires from starting and reduce the number of fire related injuries and deaths.
62. Whilst our statutory duty is to prevent fires, we also have an important role to play in the wider health and wellbeing and crime reduction agendas. Our key roles are set out within our [Prevention Policy](#) and include the delivery of youth intervention programmes, road safety advice and general fire safety education.

### **► How we assure our Prevention arrangements**

63. Our SAR process provides us with the opportunity to consider a wide range of data, both locally and nationally to support our strategic decision making, including how and where we deliver our prevention activities.
64. To further identify those who may be at risk from fire we use modelling and profiling techniques coupled with data and information from our partners, public referrals, and local knowledge to ensure that appropriate interventions are made to educate, support, and reduce those risks. Priority is given to those identified as being at the highest risk.
65. We are significantly involved in the delivery of a wide range of education and engagement programmes on key focus areas. These include the general wellbeing of

vulnerable people, road safety, general risk education and improving the lives and opportunities for young people.

66. As a result of strong partner working arrangements, including the work we undertake with local Health and Wellbeing Boards, we have seen an upward trend in prevention referrals. This has allowed us to improve the targeting of our prevention work and provided us with access to a greater number of the most vulnerable people in our communities.
67. Additionally, we proactively engage with key stakeholders within health and other partner organisations in the development and delivery of the Integrated Care System (ICS) across our Service area. The Integrated Care Board (ICB) and Integrated Care Partnership (ICP) are essential to the successful delivery of the commissioning model, of which we are embedded.
68. We have robust workforce planning arrangements in place alongside robust training and procedural guidance to ensure that we have resilience in delivering professional and well regarded prevention services to our communities.
69. We provide Safe & Well visits to vulnerable members of the community. This is a person-centred in-home visit carried out by a trained Safe & Well advisor or operational crews. During the visits, and where applicable, occupants will be given advice on the following areas, and if required, the checking and/or installation of fire safety equipment will take place:
  - using electricity safely
  - cooking safely
  - making an escape plan
  - what to do if there is a fire
  - keeping children safe
  - good practice – night-time routine and other points relevant to the resident or property, and
  - identifying and discussing any further support required.
70. Our Safe & Well visits are quality assured through the auditing of visits and follow up customer satisfaction and behaviour change surveys to ensure that the right approach is being taken. This allows us to identify how we can continue to provide the highest standard of service to our communities.
71. During the Coronavirus pandemic we continued to target those that were identified as being at high risk of fire. All those not considered high risk were provided with advice via the telephone and their details were retained until we were able to provide a visit. Our prevention team has worked effectively to ensure that the backlog of work resulting from the pandemic was cleared within the first six months of 2021-22.
72. We support national and local campaigns designed to raise awareness of community fire risks across a wide range of channels to raise public awareness and reduce preventable deaths. These campaigns include, amongst others, electrical fire safety week and boat fire safety week.

73. We have developed a range of road safety education resources which have been designed to help us engage with high-risk road user groups and reduce the number of casualties on our road network. To support this work, we have good working relationships with road safety partners across our Service area to ensure that an effective multi-agency approach is in place.
74. We deliver a number of targeted road safety programmes including the 'Safe Drive Stay Alive' roadshow to young drivers and passengers aged 16-19, the 'Survive the Drive' programme which is delivered in partnership with and funded by the Ministry of Defence and the 'Biker Down' programme.
75. We are heavily engaged with the support of youth development programmes. Our universal educational programmes for children and young people are delivered under the banner of '[Dorset & Wiltshire Inspirational Education \(DWISE\)](#)'. This programme aims to help children and young people live healthier and safer lives and is inspired by our firefighters.
76. We also deliver [SPECTRA](#) (Support, Purpose, Enthusiasm, Challenge, Trust, Resilience, Achievement) courses. These are tailored development programmes for young people up to the age of 18 and have been designed to promote empowerment in a positive environment. We work closely with partners to ensure that we offer this course to those who will gain the most benefit from attending. This may include those experiencing difficulties with mental health and wellbeing, young people at risk of exclusion from school or those experiencing social exclusion through disability or care responsibilities.
77. Our road safety, fire education and youth intervention schemes are measured and evaluated through attendee behavioural change surveys and feedback questionnaires. These processes ensure that we constantly review our arrangements to ensure that we are strengthening our approach where any opportunities exist to do so.
78. We have a key role in safeguarding those most at risk in our communities and fully recognise our duty to safeguard adults and children at risk. We work closely with partners including health leads, clinical commissioning groups and other multi agency partners via safeguarding boards to ensure we play a key role in identifying and supporting those people when they need us.
79. We ensure that our staff are trained to understand their responsibilities in relation to safeguarding and equip them to be able to deal with cases as and when required. Mandatory safeguarding training is provided to operational and non-operational roles. Additionally, we provide training and awareness for employees with specific safeguarding responsibilities. Out of hours Safeguarding referral support to our staff is provided through our Duty Area Manager.
80. We have developed and implemented a prevention evaluation framework. This allows us to review and reflect on the work we deliver to ensure that we are providing the best outcomes for individuals, society, and the Service.
81. In our first HMICFRS report, the Inspectorate made special mention of our positive arrangements to prevent fires and other emergencies and in particular, the delivery of safety messages to children, the targeting of our Safe & Well visits, and how we work with our partners and other organisations to prevent fires.

82. Following our Covid-19 specific inspection the Inspectorate also stated that.

*“A notable achievement was the creative way in which the prevention team promoted the Government’s main Covid-19 safety messages. For example, it produced several interactive road safety and school training packages for younger children that relate to Covid-19 specific issues. This material has been shared with several fire and rescue services, and local authorities. In addition, Road Safety GB has promoted it nationally”.*

## **Protection**

83. We are the enforcing Authority for the fire safety requirements of the Fire and Rescue Services Act 2004, the Fire Safety Act 2021, and the Regulatory Reform (Fire Safety) Order 2005, along with other related legislation. Our [Protection Policy](#) provides oversight on the range of work that we undertake and is supported by our [Enforcement Plan](#).

84. Our Fire Safety Inspectors actively engage with businesses to provide support and fire safety guidance and where necessary, enforce fire safety standards.

85. Our Fire Investigation Officers gather and collate information from incidents to support serious case conferences and for the use of HM Coroner to assist in reducing the incidence of fire.

86. When appropriate, our Fire Investigation Officers will work in partnership with the Police and other enforcement agencies to undertake investigation work.

### **► How we assure our Protection arrangements**

87. In 2021-22, we developed a revised Risk Based Inspection Programme (RBIP). This is the process that allows us, through the application of a risk calculation matrix, to identify and target premises that may have known specific risks or are likely to have fire safety compliance issues.

88. Our protection activity is supported by data shared through effective partnerships such as local authority building control and licensing teams. We also receive information through fire safety referrals from the public in addition to the local knowledge of our staff.

89. We continually review data to help us to identify those most at risk from fire and maximise the opportunities for interventions, including those located in areas outside of our response standards.

90. We provide fire safety advice and support to businesses directly and by engaging with business groups like the British Chambers of Commerce. We also provide key information through social media and via our website. We aim to do this in a way that supports business growth and economic prosperity. However, we also take our enforcement role seriously and we have robust, legally compliant processes in place to make sure that public safety is maintained.

91. Where concerns for fire safety are received from the public, a Fire Safety Inspector is tasked to deal with the issue through a site visit or a multi-agency visit. Where we are not the enforcing agency for an enquiry, we will refer the information to the primary enforcing agency.

92. Our Fire Safety Inspectors are trained in accordance with the NFCC Competency Framework and to conform with legal compliance, all of our inspectors are issued with warrant cards.
93. Each fire safety audit is recorded on our internal system and the outcomes of each audit are sent to the responsible person by letter or email. This communication will clearly set out any actions that may be required to improve the overall fire safety provision at the premises concerned. Internally, we have a quality assurance process in place to ensure consistency of our approach to fire safety and application of outcomes.
94. To ensure our compliance with the Environment and Safety Information Act 1988, we publish and update the NFCC enforcement register with all enforcement action taken on premises.
95. Unwanted automatic fire alarms place a significant demand upon our resources. To address this, we have implemented call reduction methods in our Fire Control Centre which seek to challenge responses to automatic fire alarms. As a result, we are experiencing a downward trend in the number of calls that require a response.
96. Where we identify repeated unwanted fire alarms, our protection team will carry out an audit, with particular emphasis on the effective management of fire detection and warning systems, to assist with driving down future instances.
97. Internally, our prevention and protection teams share intelligence to create a joined up approach to reduce community risks and to support communities in need. This is achieved through regular meetings and our internal risk sharing portal. Fire safety awareness has been delivered to prevention teams to ensure they are appraised of fire safety issues that they are likely to encounter.
98. Our operational response crews are also being trained to support the delivery of fire safety work and are undertaking lower risk graded inspections. This allows our fire safety inspectors to focus their resources on reviewing and managing higher risk premises.
99. Our community engagement work has been strengthened at station and managerial levels to allow us to better understand the diverse needs of the communities we serve. This will enable us to appropriately tailor our approach to support all aspects of service delivery, including fire safety, where issues are identified.
100. In our first HMICFRS inspection, it was observed that we are.  
*“Good at protecting our public through fire regulation and have a robust approach to compliance within fire safety legislation”.*

## **Response and Resilience**

101. Our key response and resilience activities are set out in our [Response and Resilience Policy](#). Our provision of immediate emergency response consists of front-line fire engines and specialist appliances operating from 50 fire stations across our Service. Over 80% of our fire appliances are crewed by on-call firefighters. Emergency call handling and mobilisation of resources is managed by our Fire Control Centre.

## ► How we assure our Response and Resilience arrangements

102. We have in place defined response plans for different incident types to ensure we provide the most effective response. However, our fire control staff have the ability to apply, where appropriate, 'dynamic mobilising'. This allows them to increase or decrease resources based on information received at the time of call to ensure the most appropriate response.
103. Having a dedicated Fire Control Centre ensures that we are compliant with the Fire & Rescue Services Act 2004, to make provision for the handling of calls for help and for summoning the appropriate resources to respond to emergencies.
104. Our Fire Control Centre is supported through our partnership with other fire and rescue services across the Networked Fire Services Partnership (NFSP) which ensures that mutual support is available from control rooms in Devon & Somerset and Hampshire & Isle of Wight.
105. We operate borderless mobilising within the NFSP meaning that the nearest resources are mobilised to incidents regardless of geographical boundaries. This ensures that those in need of assistance receive the quickest available response. Across the NFSP, we have developed joint capabilities where these are appropriate and continue to strengthen aligned ways of working.
106. If required, and to support an effective response, we are able to request additional resources from bordering fire and rescue services or from further afield through the NFCC and the National Coordination and Advisory Framework (NCAF).
107. Our arrangements for flood rescue and provision of high-volume water pumping have recently been independently assured by NFCC National Resilience as part of an ongoing programme of assurance. A small number of minor changes were identified and implemented to help us strengthen our arrangements.
108. We are heavily involved in effective multi-agency liaison arrangements and the sharing of resources. This contributes to an enhanced incident response when required and includes our participation in the National Inter-Agency Liaison Officers (NILO) network, the Joint Emergency Services Interoperability Programme (JESIP) and Critical National Infrastructure and Safety Advisory Groups.
109. The availability of our resources is monitored through Service wide ICT software which provides real time and accurate availability information. Our Fire Control Centre constantly monitors resource availability and will relocate resources as and when required to support an effective & timely operational response.
110. The overall availability of our resources is monitored by the Duty Group Manager, and we have plans in place to manage reductions in resource availability across our four Groups (Bournemouth, Christchurch and Poole, Dorset, Swindon, and Wiltshire). Our Fire Control Centre has business continuity plans in place to cover crewing degradation across the NFSP.
111. Our emergency response standards focus on life risk. Where there is an incident at a property with sleeping risk (private dwellings, care homes, hospitals, sheltered accommodation, student accommodation, hostels etc) we send at least two fire engines. Following research undertaken with Exeter University into fire survivability, we aim for the

first fire engine to arrive, on average, within ten minutes from the time the call is received by our Fire Control Centre (this includes call handling, turnout and travel time).

112. Where applicable, premises that are located outside of the ten minutes response time zone will receive increased prevention activity to help reduce the risk of a fire occurring in the first place.
113. Performance management of our incident response times are monitored across the four Groups and reported through our performance management system at LPS Committees and Authority meetings. Where appliances fail to meet response times, the incident is scrutinised to inform learning.
114. The availability of on-call firefighters continues to reflect the national picture, but we are working hard to ensure that we continue to attract and retain on-call staff. Our approach to this is set out below at line 150 as a response to one of our known current and future challenges.
115. To support an effective and safe response, our operational crews collect risk information relating to specific premises. This information can then be called upon to help ensure the safety of persons at that location and to support the effective management of the incident. We have procedural guidance and governance arrangements in place to ensure that the risk information we hold remains relevant, accurate and up to date.
116. Where appropriate, we share risk information with our bordering fire and rescue services via a shared portal. This ensures that first responders from outside of our own service have access to the information they may require to help manage an incident safely and effectively.
117. Risk information is made accessible to all crews via electronic Mobile Data Terminals (MDTs) and Risk Information Tablets (RITs). All operational pumping appliances have one fixed MDT and one RIT which is demountable and enables staff to access information whilst away from the appliance at the incident ground.
118. Our incident command framework supports the delivery of an effective response to the range of incidents that we attend. Incident command training is delivered through a combination of different methods including classroom-based input, practical assessments (which may incorporate the use of body cameras and other technology), and specific officer training days. Incident command training also covers the concept of operational discretion.
119. Incident command training is focused on the risks that our crews are likely to face. This is further supported by the provision of multi-agency incident command training via the Local Resilience Forums (LRFs). This ensures that our incident commanders have the necessary skills to effectively manage incidents when a multi-agency approach is required.
120. Multi agency training includes the JESIP Command Course, Multi Agency Operational Training, Multi Agency Tactical Training and Multi-Agency Gold Incident Command (MAGIC) course where required.
121. The embedding of JESIP ensures that we remain up to date with working practices and able to jointly manage and learn from events with the other emergency services. This provides us with assurance that our initial multi-agency response to all incidents is organised, structured, and practiced in line with the JESIP principles.



122. To ensure that our crews are fully prepared for reasonably foreseeable incidents, we have an internal exercising procedure. This provides clear direction on the requirements for different exercise types including the requirement for cross-border and multi-agency exercises.
123. Our Service level exercises are reviewed and agreed annually and are aligned to identified risks. Exercises are recorded electronically, and all exercise events are debriefed to ensure that any learning is captured and communicated.
124. We are also involved with the exercising programmes within both the Dorset and Swindon & Wiltshire LRFs, and we chair both training and exercising groups on a quarterly basis. This collaborative working helps to deliver a joined up approach which in turn improves the overall efficiency and effectiveness of our response and resilience arrangements.
125. Our work with both LRFs helps us ensure that we meet our obligations under the Civil Contingencies Act 2004. We are also the employing body for the Dorset Civil Contingencies Unit. Our risk management arrangements are aligned to the LRF community risk registers and national risk registers to make sure we have the appropriate response and recovery plans and resources in place.
126. We complete an annual review against both the community and national risk registers to ensure that we have considered any changes to existing risks and identified any new or emerging risks.
127. Our business continuity arrangements are aligned to the Business Continuity Institute approach as best practise. Annually, we review and assure that our arrangements are appropriate and considerate of any emerging threats, risks and challenges.
128. Our strategic managers lead and support LRF executive meetings and our territorial Group Managers support and contribute to LRF business management meetings, ensuring our own plans and response arrangements are integrated with partners.
129. We have in place the nationally recognised command structures associated with integrated emergency management which are i) Strategic Coordinating Group (SCG) ii) Tactical Coordinating Group (TCG). Communication protocols are in place to support urgent, real time, information sharing during the early stages of a multi-agency incident before TCGs and SCGs can be established.
130. Our performance management system provides oversight and transparency of our response and resilience arrangements for our senior managers.
131. HMICFRS, following our first inspection, reported that they were pleased with the performance of our Service in keeping our communities safe and secure and provided an overall score within their Effectiveness pillar of 'Good'.

### **Operational Competence**

132. The operational competencies that must be maintained by our officers, firefighters and control staff are aligned to the Fire Professional Framework and form part of our Operational Licence. A structured approach is in place for the design, delivery, and assessment of each element of the Operational Licence.

133. Our annual training plan is regularly reviewed and updated to ensure it remains aligned to our CSP so that our operational staff have the skills and knowledge to deal with the operational incidents they are likely to encounter. Progress against this plan is monitored by the Head of Operational Training.
134. We have a specialist database in place which is used to manage and record operational skills competencies. This is monitored monthly by management at all levels to ensure that corporate standards are maintained.
135. The Inspectorate awarded a rating of 'Good' within their People pillar, confirming that we are good at: looking after our staff and their health and wellbeing, understanding the skills and capabilities of our workforce, appropriately monitoring, and recording training delivered and ensuring sufficient resilience when crewing shortfalls arise.

### **Operational Learning**

136. Large and more complex incidents are monitored for safety and effectiveness through the mobilisation of Operational Assurance Officers who assess the management of the incident from an impartial perspective. The role of operational assurance can be undertaken at any incident provided that resources are available to do so. Learning or best practice identified may be used to inform future improvement and relevant information is disseminated internally for information when appropriate.
137. We have a defined approach to operational debriefing to support reflection, learning and the identification of good practice. Information identified through these processes is managed through our Operational Effectiveness Database (OED) and helps to support a culture of continuous operational improvement.
138. The OED is additionally used to assess, process, and disseminate key communications received from National Operational Learning (NOL), Joint Organisational Learning (JOL) and from the NFCC.
139. All NOL/JOL information, along with any information received from HM Coroner or other published national reports released will be assessed to establish if there are any required actions or need for circulation to support our approach to operational learning.
140. We have developed a programme of operationally focused audits in co-ordination with our senior managers to strengthen our approach to operational assurance and continuous improvement. Any opportunities to strengthen our arrangements will be considered.

### **Health, Safety & Welfare**

141. We fully recognise and accept our responsibility for the health, safety, and welfare of our members of staff and others who may be affected by our activities. Our accidents and near misses are low and have an improving long-term trend. A detailed quarterly health and safety report is considered by our Health and Safety Committee and by elected Members via the Finance & Audit Committee.

142. We publish detailed procedures in the support and continuous improvement of our health, safety, and welfare arrangements. These are developed to take account of relevant legislation and guidance and are openly consulted upon to provide staff with relevant and comprehensive information on the risks they face, and the preventative and protective measures required to control them.
143. We continue to maintain our accreditation to the International Organisation for Standardisation (ISO) 45001 Health and Safety Standard and are one of only a small number of fire and rescue services in England to have achieved this standard.
144. These arrangements require external validation from external auditors trained to British Standard Institution's competencies every six months and this helps to further assure that we have robust systems in place for actively monitoring the effectiveness of our health and safety management procedures.
145. Any key findings emerging from these audits are reported to senior managers and elected Members.
146. As part of our continued assurance arrangements for this standard we are also required to undertake a programme of internal audits to monitor compliance and identify areas for improvement.
147. An annual programme of internal audit work is designed and monitored by the Health & Safety team. We provide formal audit training to a number of staff across both the operational and corporate sides of the business to support this approach.

### **Current and future challenges**

148. The following strategic risks are currently being monitored by the Authority.  
**Secure financial sustainability that ensures and maintains effective Service provision**
149. Financial sustainability continues to be a key risk and focus area for us. The Authority agreed the revised budget and Medium-Term Finance Plan (MTFP) on 9 February 2022. The forecast MTFP position shows some improvement over the previous MTFP but, in the absence of a long term funding settlement, there remains significant uncertainty about our future financial position. Additional budgetary provision was made for the impact of inflationary pressures, but this was based on information at the end of December 2021 and additional provisions may not be sufficient given the continued increases in prices and the impact of the conflict between Russia and Ukraine. We are continuing to engage with local Members of Parliament, the Home Office, the Department for Levelling Up, Housing and Communities, and the NFCC to influence the debate on financial sustainability for fire and rescue services.  
**A robust and financially sustainable on-call duty system to meet the needs of our Service**
150. Over 80% of our fire engines are crewed by on-call firefighters who balance their time between their primary employment and ourselves. As with the fire and rescue service nationally, the on-call duty system model remains challenging. To improve on-call fire

engine availability, our selection and recruitment processes have been reviewed and strengthened. This includes having recruitment plans focussed on bridging contractual gaps and prioritising stations where most value can be achieved. An on-call steering group, including representative bodies, managers and on-call staff are also reviewing recruitment practices and undertaking a study into reasons for leaving. To improve future financial and operational sustainability, a new pay model was implemented in 2020, with an evaluation plan in place to monitor progress and improvement. A wider availability improvement plan is in place to help us improve operational availability in rural areas. This plan includes reviewing attribute-based response, paired stations providing alternate weekend cover, targeted recruitment schedule and contract review management. Furthermore, there is continued engagement with primary employers, promoting the role of an on-call firefighter in the community.

### **Protection against cyber risks**

151. The threat of cyber incidents, both nationally and locally, has remained on the increase. We have good information security risk management processes in place to monitor and manage the risk. As required under the Civil Contingencies Act 2004, we have robust and resilient business continuity arrangements in place to enable us to respond in the event of an incident and these plans have been exercised and tested. An internal audit of our information security processes in 2020 found that our arrangements are ‘adequately’ managed. We continue to strengthen our technical security arrangements which are central to the resilience and safeguarding of our critical functions. A revised e-learning course has been introduced to ensure that all staff are aware of their data protection responsibilities and the latest cyber threats. We have ensured appropriate technical measures are in place to protect our data and that our staff understand the threats and the action they need to take to avoid security incidents in a remote environment. Cyber Security arrangements are aligned to the Government’s Cyber Essentials standard and the National Cyber Security Centre (NCSC) Minimum Cyber Security Standard. An annual ICT Health Check provides assurance that our technical arrangements are in place to protect our information assets. Protective monitoring is in place as well as threat monitoring through our membership of cyber security information sharing partnership (CISP) and South-West warning advice and reporting point (WARP).

### **Failure to sufficiently resource potential changes to the fire safety and building safety regimes**

152. We continue to anticipate and monitor the impacts of the future Building Safety Bill and the effects of the Fire Safety Act 2021 on future legislative change. The Building Risk Review work was completed within the required time period with a requirement to triage and audit high-rise residential buildings of 18 metres and above. Work is progressing with premises remediation and the targeted RBIP. Organisational protection capacity has been increased with operational crews now trained and delivering business fire safety checks in lower risk premises. We have assessed the resources to meet these increased demands and will continue to anticipate future workforce and competency requirements. The NFCC Protection Standard has been published and Government grant funding is being utilised to support the development of capacity and capability within fire safety, and plans are in place to ensure the funding is used and reported efficiently and effectively. The Hackitt Report and the Grenfell Tower Public Inquiry have provided several areas that we await implementation detail through legislative change.

## **Sustainability of our operational training facilities**

153. The Service must have tenable and appropriate operational training, with sufficient resources and provision, to ensure a safe and suitable response to emergencies. We currently provide operational training across four sites which were inherited from the legacy Services prior to our combination. To safeguard future challenges, meet environmental responsibilities and ensure that the training facilities are cost effective, fit for purpose and sustainable, alternative opportunities need reviewing and investment will be required. With the ongoing economic uncertainty, inflation driving increasing costs, along with supply chain disruptions and environmental pressures, the future operational training provisions could be compromised.

## **Reduction in frontline services due to the loss of staff due to industrial action**

154. The national economic position, along with the cost-of-living crisis, is causing unrest across many sectors. This has begun to result in periods of industrial action across several sectors. The direct or indirect actions due to industrial disputes may cause a loss of staff and the consequential impact service provision. The impact upon the Service will depend on the working group undertaking action. Impacts may include the ability to respond effectively to emergency calls and/or the need to activate business continuity plans following delays in the supply chain of goods and/or services.
155. Our strategic risks are reviewed monthly by senior managers and scrutinised quarterly by elected Members through our Finance & Audit Committee. Our strategic risk register and quarterly reports are published on our website.

## **Conclusion**

156. Our Statement of Assurance provides you with a comprehensive overview of how we maintain high standards of governance and services we provide to our communities.
157. Her Majesty's Inspector (HMI), Wendy Williams CBE, in her press release, following the publication of our first HMICFRS inspection stated:

*'Our first inspection of Dorset & Wiltshire Fire and Rescue Service has found that it is performing to a high standard in all areas.'*

*'The residents of Dorset and Wiltshire can be confident that they are receiving a quality service.'*

158. In addition, following the Covid-19 themed inspection, HMI Williams, in her letter of 20 January 2021, stated:

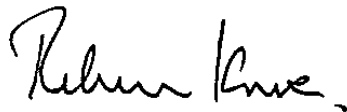
*'I am grateful for the positive and constructive way your service engaged with our inspection. I am also very grateful for the positive contribution you and your service have made to your community during the pandemic.'*

*'We were pleased with how the service continued to maintain its core functions during the pandemic, in particular how innovatively it provided its prevention activities.'*

*'The service's strategic leadership team regularly communicated with its staff and had positive wellbeing support in place.'*

159. Whilst we recognise that there continues to be future challenges, we are firmly committed to embedding a culture of continuous improvement that helps us to address and manage those challenges.
160. We are satisfied that the systems and processes that we have in place across our Service, many of which have been scrutinised internally and by external agencies, are sufficiently robust to provide assurance of our governance, finance, and operational arrangements.
161. Should you have any queries or require any further information, please do not hesitate to contact us and we will be more than happy to help.

**Cllr Rebecca Knox**



**Chair  
Dorset & Wiltshire Fire and  
Rescue Authority**

**Ben Ansell QFSM**



**Chief Fire Officer  
Dorset & Wiltshire Fire and  
Rescue Service**